

RECEIVED  
CENTRAL FAX CENTER

FEB 05 2008

## FAX TRANSMISSION

DATE: February 5, 2008

PTO IDENTIFIER: Application Number Not Yet Assigned 10/734,651  
Patent Number

Inventor: Thomas B. Kent

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: EDWARDS ANGELL PALMER & DODGE LLP  
Kongsik Kim

PHONE: (617) 239-0839

Attorney Dkt. #: 69685CIP(301264)

PAGES (Including Cover Sheet): 4

CONTENTS:	Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (1 page) Statement Under 37 CFR 3.73(b) (1 page) Certificate of Transmission (1 page)
-----------	---

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (617) 517-5509 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

EDWARDS ANGELL PALMER & DODGE LLP  
P.O. Box 55874, Boston, Massachusetts 02205  
Telephone: (617) 239-0100 Facsimile: (617) 227-4420

RECEIVED  
CENTRAL FAX CENTER

FEB 05 2008

Approved for use through 12/31/2008. PTO/SB/92 (61-06)  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/734,651		
	Filing Date	12/12/2003		
	First Named Inventor	Thomas B. Kent		
	Art Unit	3736		
	Examiner Name	John P. Lacyk		
	Attorney Docket Number	69685CIP(30,1264)		

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.  
OR  
☒ I hereby appoint the practitioners associated with the Customer Number: 21874

☒ Please change the correspondence address for the above-identified application to:  
☒ The address associated with Customer Number: 21874  
OR

☒ Firm or Individual Name **EDWARDS ANGELL PALMER & DODGE LLP**  
**Kongsik Kim**

Address **P.O. Box 55874**

City **Boston**

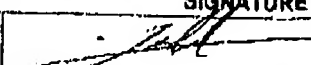
Country **US** State **MA** Zip **02205**

Telephone **(617) 439-4444** Email

I am the:

☐ Applicant/Inventor.  
☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature 

Name **Tien-Li Lee, CEO - Orlon Pharmaceuticals, Inc.**

Date **12/7/07** Telephone **858-356-0378**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of **2** forms are submitted.

601872

RECEIVED  
CENTRAL FAX CENTER

FEB 05 2008

PTO/SB/06 (00-06)  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: ONKOR PHARMACEUTICALS, INC.Application No./Patent No.: 10/734,651Filed/Issue Date: 12/12/2003Permanent Magnet Keeper-ShieldEntitled: AssemblyONKOR PHARMACEUTICALS, INC., a Company

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.  
(The extent (by percentage) of its ownership interest is \_\_\_\_\_ %)
- in the patent application/patent identified above by virtue of either:
- A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_ Frame \_\_\_\_\_, or a true copy of the original assignment is attached.

OR

- B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:
1. From: RUDGE et al. To: FERX INCORPORATED  
The document was recorded in the United States Patent and Trademark Office at Reel 015358, Frame 0807, or for which a copy thereof is attached.
2. From: FERX INCORPORATED To: ONKOR PHARMACEUTICALS, INC.  
The document was recorded in the United States Patent and Trademark Office at Reel 020196, Frame 0702, or for which a copy thereof is attached.
3. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
- ☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.  
(NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO.)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Signature

Date

Printed or Typed Name

Telephone Number

Title

611674

RECEIVED  
CENTRAL FAX CENTER

FEB 05 2008

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.  
Approved for use through 07/31/2008. OMB 0651-0031  
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Application No. (if known): 10/734,651

Attorney Docket No.: 69685CIP(301264)

**Certificate of Transmission under 37 CFR 1.8**

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on February 5, 2008  
Date

  
Signature

Alma Woodberry

Typed or printed name of person signing Certificate

Registration Number, if applicable

(617) 239-0100

Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Revocation of Power of Attorney with New Power of Attorney and Change  
of Correspondence Address (1 page)  
Statement Under 37 CFR 3.73(b) (1 page)  
Certificate of Transmission (1 page)